

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT								
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP
1	/						51		/				
2	/	/					52		/				
3		/					53		/				
4		/					54		/				
5	/						55		/				
6	/						56		/				
7		/					57		/				
8		/					58	/					
9		/					59		/				
10	/						60		/				
11		/					61		/				
12		/					62		/				
13		/					63	/					
14		/					64		/				
15		/					65		/				
16		/					66		/				
17		/					67		/				
18		/					68	/					
19		/					69		/				
20		/					70		/				
21		/					71		/				
22	/						72		/				
23		/					73		/				
24		/					74		/				
25		/					75	/					
26		/					76		/				
27		/					77		/				
28		/					78	/					
29		/					79		/				
30		/					80		/				
31		/					81		/				
32		/					82		/				
33	/						83		/				
34		/					84		/				
35		/					85		/				
36		/					86		/				
37		/					87	/					
38		/					88		/				
39		/					89		/				
40		/					90		/				
41		/					91		/				
42		/					92		/				
43		/					93		/				
44		/					94		/				
45		/					95		/				
46		/					96		/				
47		/					97		/				
48	/						98		/				
49		/					99		/				
50		/					100		/				
TOTAL IND.	←		←		←		TOTAL IND.	←		←		←	
TOTAL DEP.	←		←		←		TOTAL DEP.	←		←		←	
TOTAL CLAIMS	←		←		←		TOTAL CLAIMS	←		←		←	

13
83
96